

Zika Fever - Information for Clinicians

Please contact your county health department by the next business day if you suspect a patient has Zika fever to ensure prompt mosquito control efforts.

Zika fever, a dengue-like illness caused by a mosquito-borne flavivirus, has been identified in several countries in Central and South America, Mexico and the Caribbean including Puerto Rico. Outbreaks have previously been reported in Africa, Southeast Asia and the Pacific Islands. **The Ministry of Health of Brazil has reported an increase in the number of babies born with microcephaly and other poor pregnancy outcomes in areas experiencing Zika virus outbreaks**. Further studies are being conducted to investigate this concern. Fetuses and infants of women infected with Zika virus during pregnancy should be evaluated for possible congenital infection and neurologic abnormalities.

Transmission occurs through the bite of an infected mosquito, including the same mosquitoes that can transmit dengue and chikungunya. Perinatal, in utero, and possible sexual and transfusion transmission has also been reported. **Suspect cases should be advised to avoid mosquito bites while ill to prevent infection of local mosquitoes.**

Incubation period is approximately 2 to 14 days.

Clinical Presentation: Only about 1 in 5 people infected with Zika virus are symptomatic. Zika fever is a mild illness with symptoms similar to those of mild dengue fever. Severe disease requiring hospitalization is uncommon. Treatment is symptomatic and illness typically resolves within a week. Co-infections with dengue or chikungunya are possible and should be considered. Aspirin and other non-steroidal anti-inflammatory drugs are not advised in case of co-infection with dengue. Pregnant women with fever should be treated with acetaminophen. Signs/symptoms of Zika fever may include:

- Acute fever (often low grade)
- Maculopapular rash
- Arthralgia

- Conjunctivitis
- Myalgia
- Headache
- Retro-orbital pain
- Vomiting

Laboratory testing: Polymerase chain reaction (PCR) at Florida Department of Health can be used to detect viral RNA in serum samples collected during the first week post-symptom onset. PCR may also detect virus in urine, possibly longer than serum. Serum antibody tests are also available, however, cross-reaction with related flaviviruses (e.g. dengue and West Nile viruses) is common and results may be difficult to interpret. Commercial testing for Zika virus is currently not available.

Please contact your county health department to request Zika virus testing for patients meeting the following criteria:

- Currently pregnant women who (while pregnant) experienced two or more of the following signs/symptoms: fever, maculopapular rash, arthralgia, or conjunctivitis within two weeks of travel to an area reporting Zika virus activity regardless of the length of time since the travel/illness occurred OR
- Mothers of an infant or fetus with microcephaly or intracranial calcifications **and** with history of travel to an area with Zika virus activity during pregnancy

OR

• If not pregnant, persons with two or more of the following signs/symptoms: fever, maculopapular rash, arthralgia or conjunctivitis **and** a history of travel to an area reporting Zika virus activity in the two weeks prior to illness onset <u>or</u> is a suspect local case

Guidance will be updated as additional information becomes available.

Resources:

Florida Department of Health in Monroe County: 305-293-7500

DOH: http://www.floridahealth.gov/diseases-and-conditions/mosquito-borne-diseases/index.html

CDC: http://www.cdc.gov/zika/

CDC Zika virus and pregnancy MMWR: http://www.cdc.gov/mmwr/volumes/65/wr/mm6502e1er.htm